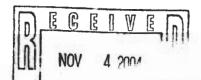
State of Wisconsin Department of Natural Resources PO Box 7921, Madison WI 53707-7921 dnr.wi.gov



Green Tier Application

Form 4800-022 (8/04)

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Notice: Collection of this information is authorized under s. 299.83 Wis. Stats. Participation in Green Tier and completion of this form are voluntary. Personal information collected on this form, including such data as your name, address, phone number, etc., will be used in the implementation of Green Tier and will be made broadly available under the Green Tier program, information will also be made accessible to requesters under Wisconsin's Public Records Law (ss. 19.32 - 19.39, Wis. Stats.). Applications must be considered complete by the Department of Natural Resources in order to be processed. For application instructions, see "Green Tier Application Instructions," publication number CO-501.

OR OF PERSON.	pplication		AND DESCRIPTION OF THE PARTY OF	ation Request	Samuel Market Barrier				
			entity that is part of the applicant group)	MARKET STATE	WHAT WAS TO SEE				
	or Entity Na		Title						
Rou	indy's	Inc.			The state of the s				
Street /	Address		City	State	ZIP Code				
		sconsin Avenue	Milwaukee	WI	53202				
Teleph	one Numbe	Fax Number	E-Mail Addres	SS	New Realthank				
(41	(4) 231-	-5000	CHIEF TO SERVE	San Parks					
-E-E W-0-0	SERVICE AND SERVIC	mation (add additional forms for each fa	acility or activity that is to be included in G	reen Tier)					
Facility	Name			County					
Rot	indy's	Warehouse		Waukes	ha line				
Street	Address		City	State	ZIP Code				
Pal	st Far	ns	Oconomowoc	WI	53066				
Mailing	Address		City nothing your	State	ZIP Code				
875	E. Wi	sconsin Ave nue	Milwaukee	WI	53202				
Please	identify all	Facility Identification numbers (FID #) that a	pply to the covered facility or activity	RIGHT					
III. Sc	cope of Gr	een Tier Participation	COMMON TO THE PARTY OF THE PART	ALZE WELLEN	THE WALL THE PARTY OF THE PARTY				
Materi	als in suppo	rt of this section should be labeled Attachmen	of 1.	NAT DAY SOMICE	A CHARLES AND A STATE OF THE ST				
Pleas	e describe	the discrete activities to be covered in the	ne program, if the application is not for wh	nole-facility parti	cipation in Green Tier.				
N. F	nforcemen	nt Record	SVA STANDARDO DE STANDARDO	UNITED BY	MANAMARKU DO GOM				
Yes	a. Had a judgment of conviction entered against them for a criminal violation of an environmental regulation involving a covered facility or activity? If yes, please provide the date(s) of conviction and the nature of the violation(s). Applicants convicted of a criminal violation within 60 months before the date of application for Tier 1 and 120 months for Tier 2 that resulted in substantial harm to public health or the environment or that presented an imminent threat to public health or the environment are ineligible for the program.								
	X b	activity?	st them for a violation of an environmental regulation involving a covered facility or						
		Applicants with a civil judgment entand 60 months for Tier 2 that result	e judgment and the nature of the violation tered against them within 36 months be ed in substantial harm to public health equests a waiver of enforcement record	or the environ	ment are ineligible for				
	X c	activity?	stice for enforcement of an environmenta	I regulation invo	lving a covered facility o				
			yes, please provide the date(s) of referral and the nature of the violation(s).						
			e Department of Justice within 24 months before the date of application for Tier 1 and ne program, unless the applicant requests a waiver of enforcement record requirements.						
	X d	. Been issued an environmental citation	by the Department of Natural Resources	involving a cov	ered facility or activity?				
100	177		the citation and the nature of the violation(s).						
		Applicants issued an environmenta are ineligible for the program, unless	I citation within 24 months before the case the applicant requests a waiver of er	date of applicat aforcement rec	ord requirements.				
Are y	(100 mg/s)	sting a waiver from enforcement reco	rd requirements?						
	Cont.	If yes, please attach a justification. Waiv	ers may be granted in exceptional circums	stances.					

Green Tier Application

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V. Environmental Performan	100

Please provide information on the following Tier 1 or Tier 2 activities. Materials in support of this section should be labeled

Attachment 3. For definitions of environmental performance and superior environmental performance, refer to Application Instructions.

X Tier 1

- Baseline environmental performance report that addresses each covered facility or activity to be included in Green Tier. Within this
 report establish a baseline date against which future progress may be measured.
- Current environmental performance (measured against the baseline).
- · Future plans for enhancing the environment.

Tier 2

 Describe the applicants' record of superior environmental performance and the measures that it proposes to take to maintain and improve its superior environmental performance.

VI. Environmental Management System (EMS)

Materials in support of this section should be labeled Attachment 4.

Yes N

- a. Do you have an EMS certified to the International Organization for Standardization standard 14001?
- b. Do you have an EMS that is functionally equivalent as determined by the Department of Natural Resources?

If no to both questions, please proceed to next section if you are applying for Tier 1. Tier 2 applicants must have implemented an EMS to be eligible for the program.

If yes to either a. or b., please attach a copy of the following to this application:

- . Third Party Certification
- · Environmental Policy Statement
- Scope Statement
- Documented Objectives and Targets for the Facility or Activity

VII. Tier 1 Applicant Statement of Commitments

I commit to:

- a. implement, within one year of the date of this application, an EMS that is third party certified to the International Organization for Standardization or is functionally equivalent as determined by the Department of Natural Resources for each covered facility or activity under Green Tier.
- conduct annual EMS audits, with every 3rd audit performed by an outside environmental auditor approved by the Department of Natural Resources.
- c. submit to the Department of Natural Resources an annual report on the EMS audit that is in compliance with s.299.83 (6m) (a) and progress towards meeting objectives related to improved environmental performance for aspects regulated under chs. 29 to 31,160, and 280 to 299, unregulated environmental aspects, or voluntary actions to restore, enhance, or preserve natural resources.

I commit to the above statements and certify that all information provided is true and correct under penalty of law.

Signature of Applicant Statement of Commitments

Date Signed

| Date Signed | 1-05-04|

I commit to:

- a. conduct annual EMS audits performed by an outside environmental auditor approved by the Department of Natural Resources.
- b. conduct or have another person conduct an annual audit of compliance with environmental requirements that are applicable to the covered facilities and activities eligible under the program.
- c. submit to the Department of Natural Resources an annual report on the EMS audit and the environmental requirements compliance audit and reporting the results in compliance with 299.83 (6m) a. Wis. Stats.

I commit to the above statements and certify that all information provided is true and correct under penalty of law.

Signature of App		Click Here to send comments.		Date Signed		
IX. For Depar	rtment Use O	Click Here to visit Roundy's Supermarket, Inc's Green Tier Page.	Ü	tternia za zazadinio in		
Date Received	Initials of Revie		De	nied	Date Approved	
	MINISTER ST		130	11115		